**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

|                        |                    |
|------------------------|--------------------|
| Application Number     | 10/659,838         |
| Filing Date            | September 10, 2003 |
| First Named Inventor   | GABOWER, JOHN F.   |
| Art Unit               | 2831               |
| Examiner Name          | H. Ngo             |
| Attorney Docket Number | 20843-000410US     |

**ENCLOSURES** (Check all that apply)

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Postcard |
|--|---|--|
- Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                                    |          |        |
|--------------|------------------------------------|----------|--------|
| Firm Name    | Townsend and Townsend and Crew LLP |          |        |
| Signature    |                                    |          |        |
| Printed name | Craig P. Wong                      |          |        |
| Date         | February 1, 2005                   | Reg. No. | 45,231 |

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Donna Zimmerman

Date

February 1, 2005

FEB 04 2005

PTO/SB/17 (12-04)

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180)

### Complete if Known

|                      |                    |
|----------------------|--------------------|
| Application Number   | 10/659.838         |
| Filing Date          | September 10, 2003 |
| First Named Inventor | GABOWER, JOHN F.   |
| Examiner Name        | H. Ngo             |
| Art Unit             | 2831               |
| Attorney Docket No.  | 20843-000410US     |

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES  |          | SEARCH FEES  |          | EXAMINATION FEES |          | Fees Paid (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|----------------|
|                  | Small Entity |          | Small Entity |          | Small Entity     |          |                |
|                  | Fee (\$)     | Fee (\$) | Fee (\$)     | Fee (\$) | Fee (\$)         | Fee (\$) |                |
| Utility          | 300          | 150      | 500          | 250      | 200              | 100      |                |
| Design           | 200          | 100      | 100          | 50       | 130              | 65       |                |
| Plant            | 200          | 100      | 300          | 150      | 160              | 80       |                |
| Reissue          | 300          | 150      | 500          | 250      | 600              | 300      |                |
| Provisional      | 200          | 100      | 0            | 0        | 0                | 0        |                |

#### 2. EXCESS CLAIM FEES

| Fee Description   | Small Entity |          |
|---|--------------|----------|
|   | Fee (\$)     | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50           | 25       |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200          | 100      |
| Multiple dependent claims   | 360          | 180      |

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)      Multiple Dependent Claims

20      -20 or HP = 0 x \$50 = \$0      Fee (\$)      Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

2      -3 or HP = 0 x \$200 = \$0

HP = highest number of independent claims paid for, if greater than 3

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

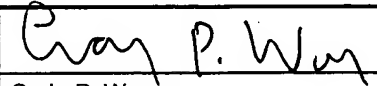
Non-English Specification, \$130 fee (no small entity discount)

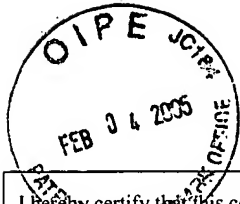
Other: Submission of Supplemental Information Disclosure Stmt

Fees Paid (\$)

180

#### SUBMITTED BY

|                   |   |                                      |                        |
|-------------------|---|--------------------------------------|------------------------|
| Signature         |  | Registration No.<br>(Attorney/Agent) | Telephone 206-467-9600 |
| Name (Print/Type) | Craig P. Wong   | 45,231                               | Date February 1, 2005  |



JPW

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

February 1, 2005  
By [Signature]

PATENT  
Attorney Docket No. 20843-000410US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the application of:

JOHN F. GABOWER

Application No.: 10/659,838

Filed: September 10, 2003

For: ELECTROMAGNETIC  
INTERFERENCE SHIELDS  
COMPRISING RECYCLED  
MATERIAL (As Amended)

Examiner: H. Ngo

Art Unit: 2831

**AMENDMENT**

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed October 6, 2004, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

The Remarks section begins on page 7 of this paper.